

**2000 ELEMENTARY AND SECONDARY SCHOOL  
CIVIL RIGHTS COMPLIANCE REPORT  
INDIVIDUAL SCHOOL REPORT: ED102**

U.S. Department of Education, Office for Civil Rights  
Washington, D.C. 20202-1172  
Due Date: February 23, 2001

**REPORTING REQUIREMENT**

This Compliance Report is required by the U.S. Department of Education under Title VI of the Civil Rights Act of 1964, Title IX of the Education Amendments of 1972, and Section 504 of the Rehabilitation Act of 1973. Implementing regulations are issued to carry out the purposes of Title VI of the Civil Rights Act of 1964, at 34 CFR 100.6(b); Title IX regulations at 34 CFR 106.71; and the Section 504 regulations are at 34 CFR 104.61.

**Public Burden Statement.** According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless such collection displays a valid OMB control number. The valid OMB control number for this information collection is 1870-0500. The time required to complete this information collection is estimated to average 9 hours per response, including the time to review instructions, research existing data resources, gather the data needed, and complete and review the information collection. **If you have any comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to:** U.S. Department of Education, Washington, D.C. 20202-1172. **If you have comments or concerns regarding the status of your individual submission of this form, write directly to:** Compliance Reports Coordinator, U.S. Department of Education, 400 Maryland Avenue, S.W., Room 5316, Switzer Building, Washington, D.C. 20202-1172.

**GENERAL INSTRUCTIONS**

- This form should be completed for each public school in the district.
- Please print legibly using a black ball-point pen.
- If you select to report via a mainframe computer cartridge or PC diskette, please see separate documentation.
- Information should be reported as of October 1, 2000, or the nearest convenient date prior to December 15, 2000, unless otherwise noted. Whenever possible, information should be provided consistent with the date of the special education Child Count in your state.
- **In order to allow us to distinguish between no students for a given item and non-applicability of that item for your school, please enter a response to all items.** If the answer to a given item is *NONE*, enter zero (0) in the appropriate space. If a particular item is not applicable in your case, enter an X in the "total" column if the item has a total; otherwise, enter an X in the far right column for that item.
- **Please mail original forms to the Office for Civil Rights.** Retain photocopied ED-101 and ED-102 forms for your reference for two (2) years from the date signed. The mailing address is: Compliance Report Project Office, Office for Civil Rights, 400 Maryland Avenue, S.W., Washington, D.C. 20202-1172.
- The "Optional TOTAL" in Column 6 of Tables 10.1, 10.2, and 10.3, and Column 4 and Row J of Table 11 are not required by OCR. They are intended for your use in making calculations if you choose to do so.
- Please add the telephone number and the **FAX telephone number** in the appropriate boxes on the form for the individual in your school who can respond to questions regarding this form.
- The certification signature block located on page 5 must be completed for all schools. **It is essential that all ten (10) pages be returned, even if no items are completed on pages 6, 7, 8, or 9.** The certification pertains to all items on the ED-102 form.
- **All schools must complete Item 17 (Teachers) on page 10 of the form.**

## DEFINITIONS

**PUBLIC SCHOOL.** An institution that provides pre-school, elementary and/or secondary instruction; has one or more grade groupings (*pre-kindergarten through 12*) or is ungraded; has one or more teachers to give instruction; is located in one or more buildings; has an assigned administrator(s); receives public funds as its primary support; and is operated by an education agency. Public schools include charter schools that receive public funding from local or state sources.

**PUBLIC SCHOOL ENROLLMENT.** An unduplicated count of students enrolled in the district as of October 1, 2000, or the nearest convenient date prior to December 15, 2000. Whenever possible, report public school enrollment on the date which is as consistent as possible with the special education Child Count date in your state.

**CHILDREN WITH DISABILITIES-IDEA.** Under the *Individuals with Disabilities Education Act (IDEA)*, children with mental retardation, hearing impairments including deafness, speech or language impairments, visual impairments including blindness, emotional disturbance, orthopedic impairments, autism, traumatic brain injury, other health impairments, or specific learning disabilities, deaf-blindness, multiple disabilities, or developmental delay; and who, by reason thereof, need special education and related services.

**CHILDREN WITH DISABILITIES-504.** An elementary or secondary student with a disability who is being provided with related aids and services under *Section 504 of the Rehabilitation Act of 1973*, as amended, and **is not** being provided with services under the *Individuals with Disabilities Education Act (IDEA)*.

- Children receiving special education services under the *Individuals with Disabilities Education Act (IDEA)*, defined under Children with Disabilities-IDEA above, are reported in the column “Served under IDEA” in Table 9, or “Students with Disabilities/IDEA” in Tables 12A and 12B, or “Students with Disabilities-IDEA” in Tables 7, 14, and 15. Children receiving services under *Section 504 of the Rehabilitation Act of 1973*, as amended, are reported in the column “Served under Section 504 Only” in Table 9 and in the column “Section 504 Only” in Tables 12A and 12B.

**ABILITY GROUPING.** Pedagogical practice of separating students into different classrooms within a grade based on their estimated achievement or ability levels, and who are ability grouped for classroom instruction in mathematics, or English-Reading-Language Arts.

**NOTE ONE:** In this application, ability grouping does NOT include grouping by achievement level on the basis of required prerequisites for certain courses, i.e., Algebra I as a prerequisite for Algebra II.

**NOTE TWO:** Ability grouping includes students pulled out of their regular mathematics, or English-Reading-Language Arts classes for Title I purposes in these subject areas.

## RACE/ETHNICITY CATEGORIES

- *American Indian or Alaskan Native:* A person having origins in any of the original peoples of North America and who maintains cultural identification through tribal affiliation or community recognition.
- *Asian or Pacific Islander:* A person having origins in any of the original peoples of the Far East, Southeast Asia, the Pacific Islands, or the Indian subcontinent. This includes, for example, China, India, Japan, Korea, the Philippine Islands, and Samoa.
- *Hispanic:* A person of Mexican, Puerto Rican, Cuban, Central or South American, or other Spanish culture or origin regardless of race.
- *Black (Not of Hispanic Origin):* A person having origins in any of the Black racial groups of Africa.
- *White (Not of Hispanic Origin):* A person having origins in any of the original peoples of Europe, North Africa, or the Middle East.

**NOTE:** In October 1997, the Office of Management and Budget (OMB) announced its decision concerning the revision of the standards for Federal data on race and ethnicity. In that announcement, OMB reported that there would be five racial categories -- American Indian or Alaska Native, Black or African American, Asian, Native Hawaiian or Other Pacific Islander, and White -- and one ethnic category -- Hispanic or Latino. Additionally, OMB announced that individuals would be allowed to select one or more categories. Under the new reporting requirements, a single, multi-racial category can **not** be used. OCR is currently working with OMB and other program offices in the U.S. Department of Education to develop reporting categories for aggregating multiple race responses. OCR expects to use these categories in the coming years in future versions of this Compliance Report. The Office for Civil Rights will provide ample notice to public elementary and secondary schools before these revisions go into effect.

LIMITED ENGLISH PROFICIENT (LEP) STUDENT. (1) Individuals who were not born in the United States or whose native language is a language other than English; (2) individuals who come from environments where a language other than English is dominant; and (3) individuals who are American Indians and Alaskan Natives and who come from environments where a language other than English has had a significant impact on their level of English language proficiency; and who, by reason thereof, have sufficient difficulty speaking, reading, writing, or understanding the English language, to deny such individuals the opportunity to learn successfully in classrooms where the language of instruction is English or to participate fully in our society.

- The *LEP* column in Tables 7, 8, 10.1, 10.2, 10.3, 12A, 12B, 13, 14, and 15 means the number of students needing LEP programs.

**NOTE: The three definitions which follow (which are used in Tables 10.1, 10.2, 10.3, and 11) are consistent with definitions used by the Office of Special Education Programs Placement form.**

**CHILDREN WHO RECEIVED SPECIAL EDUCATION OUTSIDE THE REGULAR CLASS LESS THAN 21 PERCENT OF THE SCHOOL DAY.** The number of children with disabilities receiving special education and related services outside the regular classroom for less than 21 percent of the school day. This may include children with disabilities placed in: regular class with special education/related services provided within regular classes; regular class with special education/related services provided outside regular classes; or regular class with special education services provided in resource rooms.

**CHILDREN WHO RECEIVED SPECIAL EDUCATION OUTSIDE THE REGULAR CLASS AT LEAST 21 PERCENT BUT NO MORE THAN 60 PERCENT OF THE SCHOOL DAY.** The number of children with disabilities receiving special education and related services outside the regular classroom for at least 21 percent but no more than 60 percent of the school day. This may include: resource rooms with special education/related services provided within the resource room; or resource rooms with part-time instruction in a regular class.

**CHILDREN WHO RECEIVED SPECIAL EDUCATION OUTSIDE REGULAR CLASS FOR MORE THAN 60 PERCENT OF THE SCHOOL DAY.** The number of children with disabilities receiving special education and related services outside the regular classroom for more than 60 percent of the school day. Do not include children who receive education programs in separate day or residential facilities. This category may include children placed in: self-contained classrooms with part-time instruction in a regular class or self-contained special classrooms with full-time special education instruction on a regular school campus.

## SPECIFIC INSTRUCTIONS

**Item 1. Grades Offered.** **Darken** the appropriate *YES* or *NO* bubble for each grade offered in this school. Also **darken** the bubble which represents the level that you consider your school to be. If you consider your school to be other than an elementary, middle/junior, or high school (for example, a school which offers instruction at more than one of these levels), please **darken** the *OTHER* bubble. If your school is totally ungraded, **darken** the *totally ungraded* bubble.

**Item 2. Special Education.** **Darken** the *YES* bubble if this school offers *only* special education classes, otherwise **darken** the *NO* bubble.

**Item 3. Ability Grouping.** **Darken** the *YES* bubble if you have any students in this school who are ability grouped for classroom instruction in mathematics or English-Reading-Language Arts; otherwise, **darken** the *NO* bubble.

**NOTE ONE:** In this application, ability grouping does NOT include grouping by achievement level on the basis of required prerequisites for certain courses, i.e., Algebra I as a prerequisite for Algebra II.

**NOTE TWO:** Ability grouping includes students pulled out of their regular mathematics, or English-Reading-Language Arts classes for Title I purposes in these subject areas.

**Item 4. Magnet School or Program.** A magnet school or program is a special school or program designed to attract students of different racial/ethnic backgrounds for the purpose of reducing, preventing or eliminating racial isolation. Racial isolation means a school with 50 percent or more minority enrollment. **Darken** the appropriate bubble, if this school is a magnet school or has a magnet program, regardless of the source of funding, i.e., Federal, state, or local government.

**Item 5. Charter School.** A charter school is a school providing free public elementary or secondary education to eligible students under a specific charter granted by the state legislature or other appropriate authority and designated by such authority to be a charter school. **Only provide data for charter schools for which you have received a pre-printed form.** **Darken** the *YES* bubble if the school is a charter school; otherwise, **darken** the *NO* bubble.

**Item 6. Alternative School.** An alternative school is a public elementary or secondary school that addresses the needs of students which typically cannot be met in a regular school and provides nontraditional education which falls outside of the categories of regular education, special education, vocational education, gifted and talented or magnet school programs. This definition includes schools which are adjunct to a regular school, e.g., are located on the same campus as a regular school but have a separate principal or administrator. **Darken** the YES bubble if this school is an alternative school; otherwise, **darken** the NO bubble. Also **darken** as many bubbles as are appropriate if the school is designed to meet the needs of pregnant students, students with academic difficulties, and/or students with discipline problems.

**Item 7. Pupil Statistics.** (Do not include *pre-kindergarten/pre-school* children).

**NOTE:** The column "*Students with Disabilities: IDEA*" in this table means children with disabilities receiving special education services under the *Individuals with Disabilities Education Act*. The column "*LEP*" in this table means the number of students needing LEP programs.

- A. Enrollment.** Enter in Table 7, Row A the unduplicated count of students on the rolls of the school taken, whenever possible, as of the date which is consistent with the date of the special education Child Count in your state (but no earlier than October 1, 2000, and no later than December 15, 2000). **The total number of male and female students in the *Students with Disabilities:IDEA* column (column 7) should be equal to the sum of the totals reported in Tables 10.1, 10.2, 10.3, and 11.**
- B. In Gifted Or Talented (G/T) Programs.** Enter in Table 7, Row B the number of students enrolled in special programs during regular school hours for students who possess unusually high academic ability or a specialized talent or aptitude such as in literature or the arts. Count students once regardless of the number of classes in which they are enrolled.
- C. Needing LEP Programs.** Enter in Table 7, Row C the number of students who have a home language other than English and who are so limited in their English proficiency that they cannot participate meaningfully in the school's regular instructional program.
- D. Enrolled In LEP Programs.** Enter in Table 7, Row D the number of students reported in Table 7, Row C as needing LEP programs who are enrolled in a program of language assistance (e.g., English-as-a-Second-Language or bilingual education). Do not count students enrolled in a class to learn a language other than English.

**Item 8. Discipline of Students without Disabilities.**

**NOTE:** Discipline of Students with Disabilities is reported in Table 9, using definitions of long-term suspension which correspond to those used in the *Individuals with Disabilities Education Act*. Data for students without disabilities should use the following definitions.

- A. Corporal Punishment.** Enter in Table 8, Row A the number of students who received corporal punishment during the previous (1999-2000) school year. *Corporal punishment* is paddling, spanking, or other forms of physical punishment imposed on a student. If your state or school district has a policy banning corporal punishment, please enter X in the far right box to indicate that this item does not apply. Count each student only once regardless of the number of times he or she was punished.
- B. Out-of-School Suspensions.** Enter in Table 8, Row B the number of students suspended from school for at least one (1) day during the previous (1999-2000) school year. *Out-of-School Suspension* is defined as excluding a student from school for disciplinary reasons for one school day or longer. Count students only once regardless of the number of times suspended. Do not count students suspended from the classroom who served the suspension in the school.
- C. Total Expulsions.** Enter in Table 8 Row C, the number of students expelled from school during the previous (1999-2000) school year. An *expulsion* is defined as the exclusion from school for disciplinary reasons that results in the student's removal from school attendance rolls or that meets the criteria for expulsion as defined by the appropriate state or local school authority. This includes expulsions where the student, although expelled from a particular school, continues to receive educational services from the district. Do *not* include suspensions.
- D. Expulsions--Total Cessation of Educational Services.** Of the total number of students expelled from school during the previous (1999-2000) school year (Table 8 Row C), enter the number who had a total cessation of educational services--that is, the student, after expulsion from a school, was not offered other educational services by either the school or the district.

- E. Expulsions--Zero Tolerance Policies.** Of the total number of students expelled during the previous (1999-2000) school year (Table 8 Row C), enter the number of students who were expelled because of zero tolerance policies. A zero tolerance expulsion policy is a policy that results in mandatory expulsion of any student who commits one or more specified offenses (for example, some zero tolerance policies specify offenses involving guns, or other weapons, or violence, or similar factors, or combinations of these factors).

**NOTE:** A zero tolerance expulsion policy should still be included in your response to this question, even if the resulting "mandatory" expulsion may be subject to some narrow or limited exceptions. For example, the Federal Gun-Free Schools Act permits "State law to allow the chief administering officer of . . . a local education agency to modify such expulsion requirement for a student on a case-by-case basis", and State or district zero tolerance expulsion policies may similarly give discretion for limited exceptions to the strict application of the expulsion requirement. Such policies would still be "zero tolerance policies" which should be included in your responses to this question. The count requested should only include students actually expelled as a result of such policies.

**Item 9. Discipline of Students with Disabilities.** Schools must report data on the numbers of students receiving corporal punishment during the 1999-2000 school year in Row A (see Item 8 for definition of corporal punishment). Schools also must report data on the number of students with disabilities who received long-term suspensions/expulsions during the 1999-2000 school year (suspensions of more than 10 days) in Row B (students who continued to receive services) and Row C (students for whom there was a cessation of services). The column entitled "*Served under Section 504 Only*" refers to those students receiving services solely under *Section 504 of the Rehabilitation Act of 1973, as amended*. In each row, report students only once regardless of the number of times he or she was disciplined. See general instructions for the appropriate response if a cell has no students or is not applicable to this school. Individual students may be reported in more than one row.

**Item 10. Children with Disabilities.** (Do *not* count *pre-kindergarten/pre-school* children.) Enter the number of students with disabilities by race/ethnicity, educational placement, sex, and LEP. Report all students receiving special education services at this school, whether or not they reside in this school district. Count each student only once. If a student has more than one disability, count by the primary disability. Please read the instructions fully before completing this item.

Enter in Table 10.1:

**MENTAL RETARDATION.** This refers to significantly sub-average general intellectual functioning existing concurrently with deficits in adaptive behavior and manifested during the developmental period, which adversely affect a child's educational performance.

- A. Mild Retardation.** Students require intermittent support to perform functional academic skills, activities of daily living (self-care, home living, use of their community, recreation and leisure activities, work) or communicating and interacting with others. This support may be episodic, time-limited (may be intense but for a relatively short period of time), or of low intensity over a long period of time.
- B. Moderate Retardation.** Students require limited but continuing support to perform functional academic skills, activities of daily living (self-care, home living, use of their community, recreation and leisure activities, work) or communicating and interacting with others. This support may be consistent over time. It may be either time-limited (but may be intense for a substantial period of time), or of low intensity over a life span.
- C. Severe Retardation.** Students require extensive or pervasive support to perform functional academic skills, activities of daily living (self-care, home living, use of their community, recreation and leisure activities, work) or communicating and interacting with others. Support may be of high intensity, over long periods of time, or potentially life sustaining.

**NOTE:** Complete Rows A, B, and C if your school collects this information. Rows A, B, and C are optional if your school does **not** already collect this information. If a particular cell is not applicable, enter an X in the right-most box of the cell.

- D. Total is the total of Table 10.1 Rows A, B, and C.** You must complete Row D, regardless of whether or not you have reported data in Rows A, B, and C. If a particular cell is not applicable in your case, enter an X in the right-most box of the cell.

**NOTE:** The computational total in column 6 of this table is optional. You may complete it if it will assist you in your computations. It is not required by OCR.

Enter in Table 10.2:

**NOTE:** The definitions of disability categories which follow are the same as the definitions used by the Office of Special Education Programs, as specified in the regulations for the *Individuals with Disabilities Education Act*.

- A. Emotional Disturbance.** [previously entitled Serious Emotional Disturbance] This refers to a condition exhibiting one or more of the following characteristics over a long period of time and to a marked degree, which adversely affects a child's educational performance: (1) an inability to learn, which cannot be explained by intellectual, sensory, or health factors; (2) an inability to build or maintain satisfactory interpersonal relationships with peers and teachers; (3) inappropriate behavior or feelings under normal circumstances; (4) a general pervasive mood of unhappiness or depression; or (5) a tendency to develop physical symptoms or fears associated with personal or school problems. The term includes schizophrenia. The term does not apply to children who are socially maladjusted, unless it is determined that they have an emotional disturbance.
- B. Specific Learning Disability.** This refers to a disorder in one or more of the basic psychological processes involved in understanding or in using language, spoken or written, which may manifest itself in an imperfect ability to listen, think, speak, read, write, spell, or do mathematical calculations. The term includes such conditions as perceptual disabilities, brain injury, minimal brain dysfunction, dyslexia, and developmental aphasia. The term does not include learning problems that are primarily the result of visual, hearing, or motor disabilities, of mental retardation, of emotional disturbance, or of environmental, cultural, or economic disadvantage.

**NOTE:** The computational total in column 6 is optional. You may complete it if it will assist you in your computations. It is not required by OCR.

Enter in Table 10.3: Developmental Delay.

Developmental Delay as defined in the *Individuals with Disabilities Education Act* is defined as a child who is experiencing developmental delays, as defined by your state, and as measured by appropriate diagnostic instruments and procedures in one or more of the following cognitive areas: physical development, cognitive development, communication development, social or emotional development, or adaptive development. Please refer to the instructions on the table for this item before you complete it, in order to ensure that your state and your district meet all necessary requirements.

**NOTE:** The computational total in column 6 is optional. You may complete it if it will assist you in your computations. It is not required by OCR.

**NOTE:** The column *LEP* in these tables means the number of students needing LEP programs.

**Item 11. Additional Categories of Children with Disabilities.** (Do not include *pre-kindergarten/pre-school* children). Enter the number of students by educational placement and by disability. Report all students receiving special education services at this school, whether or not they reside in this school district. Count each student only once. If a student has more than one disability, count by the primary disability.

**NOTE:** The computational total in column 4 is optional. You may complete it if it will assist you in your computations. It is not required by OCR.

- A. Hearing Impairments.** This refers to an impairment in hearing, whether permanent or fluctuating, that adversely affects a child's educational performance. It also includes a hearing impairment that is so severe that the child is impaired in processing linguistic information through hearing, with or without amplification, that adversely affects a child's educational performance.
- B. Speech or Language Impairments.** This refers to a communication disorder, such as stuttering, impaired articulation, a language impairment, or a voice impairment, that adversely affects a child's educational performance.
- C. Visual Impairments.** This refers to a visual impairment which, even with correction, adversely impacts a child's educational performance. The term includes both partial sight and blindness.
- D. Orthopedic Impairments.** This refers to a severe orthopedic impairment that adversely affects a child's educational performance. The term includes impairments caused by congenital anomaly (e.g., clubfoot, absence of some member, etc.), impairments caused by disease (e.g., poliomyelitis, bone tuberculosis, etc.) and impairments from other causes (e.g., cerebral palsy, amputations, and fractures or burns that cause contractures).

- E. *Autism*. This refers to a development disability significantly affecting verbal and non-verbal communication and social interaction, generally evident before age 3, that adversely affects educational performance. Other characteristics often associated with autism are engagement in repetitive activities and stereotyped movements, resistance to environmental change or change in daily routines, and unusual responses to sensory experiences. Autism doesn't apply if a child's educational performance is adversely affected primarily because the child has an emotional disturbance.
- F. *Traumatic Brain Injury*. This refers to an acquired injury to the brain caused by an external physical force, resulting in total or partial functional disability or psychosocial impairment or both, that adversely affects a child's educational performance. The term applies to open or closed head injuries resulting in impairments in one or more areas, such as cognition; language; memory; attention; reasoning; abstract thinking; judgement; problem-solving; sensory, perceptual, and motor abilities; psychosocial behavior; physical functions; information processing; and speech. The term does not apply to brain injuries that are congenital or degenerative, or brain injuries induced by birth trauma.
- G. *Deaf-Blindness*. This refers to concomitant hearing and visual impairments, the combination of which causes such severe communication and other developmental and educational problems that they cannot be accommodated in special education programs solely for children with blindness or children with deafness.
- H. *Multiple Disabilities*. This refers to concomitant impairments (such as mental retardation-blindness, mental retardation-orthopedic impairments, etc.), the combination of which causes such severe educational problems that the problems cannot be accommodated in special education programs solely for one of the impairments. The term does not include deaf-blindness.
- I. *Other Health Impairments*. This refers to having limited strength, vitality, or alertness, due to chronic or acute health problems such as a heart condition, tuberculosis, rheumatic fever, nephritis, asthma, sickle cell anemia, hemophilia, epilepsy, lead poisoning, leukemia or diabetes, which adversely affects a child's educational performance.
- J. *Total*. This is an optional computational row. You may complete it if it will help you in your computation. It is not required by OCR.

**Note on maintaining data by sex on students with disabilities:** The sum of the totals reported in Tables 10.1, 10.2, 10.3 and 11 equals the number of Students With Disabilities receiving special education services under IDEA reported in Column 7 on Table 7, Row A. A student should be counted only once, based on the child's primary disability, and in only one of the four tables. Although you are not required to report data by sex on Table 11, you are required to maintain data on the sex of all students with disabilities for the purposes of responding to Table 7 Row A. Please note that districts are only required to provide data on the sex of specific subcategories of students with disabilities in Tables 10.1, 10.2, and 10.3.

#### SPECIFIC INSTRUCTIONS FOR TABLES 12A AND 12B: TESTING

TABLE 12A IS TO BE COMPLETED BY ELEMENTARY AND MIDDLE SCHOOLS (GRADES K-8)

**Table 12A. Testing (for Grade-to-grade promotion).** Please complete this table *if your school administered, in the 1999-2000 school year, a district- or state-required test that students are either required to pass or that is used as a significant factor in making promotion decisions for all students taking the test.* If your school conducted tests for grade-to-grade promotion for more than one grade, please photocopy the table as many times as are necessary **BEFORE** filling it out in order to report on each test. Report data using both the original table on this page and as many photocopied tables as are appropriate.

If students were **not** required to pass a district- or state-required test to be promoted from one grade to the next, please **darken** the bubble entitled "*No such tests were administered*".

If students were required to pass such a test, please **darken** the appropriate bubble indicating whether this test was a "sole criterion" or a "significant criterion", and complete the table. If all students were required to take a district- or state-required test, and must pass the test to be promoted from one grade to the next, please **darken** the bubble entitled "*Sole criterion*". However, if all students were required to take the test, and the test is an important criterion in the decision on whether or not to promote the student from grade to grade, but other criteria, such as teacher recommendations or student grades were used in the promotion decision, please **darken** the bubble entitled "*Significant criterion*".

Please provide the following data for the testing of students in these grades during the 1999-2000 school year, by race/ethnicity, limited English proficiency (in the column entitled *LEP*), and whether the student is receiving services under the *Individuals with Disabilities Education Act* (in the column entitled *Students with Disabilities-IDEA*) or under *Section 504 of the Rehabilitation Act of 1973* (in the column entitled *Section 504 Only*), and sex.

*Do not count students who were not tested because they passed the test on a previous occasion.*

Include in Rows A or B those students who took the test and were provided with accommodations, modifications, or adaptations, such as a different setting, extended time, Braille, or use of dictionaries by LEP students.

All students who were excluded from taking a test for grade-to-grade promotion and who did not take an alternate assessment should be reported in Row C.

Students who were tested using alternate assessments should be reported in Row D. An alternate assessment is an assessment provided to children with disabilities who cannot participate in a state- or district-wide assessment program, even with appropriate accommodations.

If students are required to pass more than one test in order to be promoted from one grade to the next, include that student in the row entitled *Tested and Passed* if that student passed all tests that he or she was required to pass; if the student failed one or more tests, report that student in the row entitled *Tested and Failed*.

TABLE 12B IS TO BE COMPLETED BY HIGH SCHOOLS (GRADES 9-12)

**Table 12B. Testing (for Graduation from high school). Please complete this table if your school administered, in the 1999-2000 school year, a district- or state-required test that students are either required to pass or that is used as a significant factor in making graduation decisions for all students taking the test.**

If students were **not** required to pass a district- or state-required test to graduate from high school, please **darken** the bubble entitled "*No such tests were administered*". If students were required to pass such a test, please **darken** the appropriate bubble indicating whether this test was the "sole criterion" or a "significant criterion", and complete the table.

If all students were required to take a district- or state-required test, and must pass the test to graduate from high school, please **darken** the bubble entitled "*Sole criterion*". However, if all students were required to take the test, and the test is an important criterion in the decision on whether or not the student graduates from high school, but such other criteria as teacher recommendations or student grades were used in the graduation decision, please **darken** the bubble entitled "*Significant criterion*".

Please provide the following data for the testing of students during the 1999-2000 school year, by race/ethnicity, limited English proficiency (in the column entitled *LEP*), and whether the student is receiving services under the *Individuals with Disabilities Education Act* (in the column entitled *Students with Disabilities-IDEA*) or under *Section 504 of the Rehabilitation Act of 1973* (in the column entitled *Section 504 Only*), and sex.

*Do not count students who were not tested because they passed the test on a previous occasion.*

In Rows A or B, include those students who took the test and were provided with accommodations, modifications, or adaptations, such as a different setting, extended time, Braille, or use of dictionaries by LEP students.

All students who were excluded from taking a test for graduation from high school and who did not take an alternate assessment should be reported in Row C.

Students who were tested using alternate assessments should be reported in Row D. An alternate assessment is an assessment provided to children with disabilities who cannot participate in a state- or district-wide assessment program, even with appropriate accommodations.

If students are required to pass more than one test in order to graduate from high school, include that student in the row entitled *Tested and Passed* if that student passed all tests that he or she was required to pass; if the student failed one or more tests, report that student in the row entitled *Tested and Failed*.

ITEM 13 IS TO BE COMPLETED FOR THE HIGHEST AND LOWEST ELEMENTARY GRADES  
(BETWEEN GRADES 1 AND 6) ONLY

**Item 13. Student Assignment.** Complete this table only if the total percentage of minority students (American Indian or Alaskan Native, Asian or Pacific Islander, Hispanic, and Black [Not of Hispanic Origin]) in this school is more than 20 percent but less than 80 percent. (Do not include *pre-kindergarten/pre-school* or *kindergarten*). Report only the **entry (lowest) or exit (highest) elementary grades, which are typically grades one and five or six**. Enter in Table 13 the grade level and **darken** the bubble under the respective *YES* or *NO* columns if students are grouped in that class according to ability level. For the ability grouping definition to be used in completing Table 13, please refer to Item 3 of the Specific Instructions. Please complete by race/ethnicity and limited English proficiency.



ITEMS 14-16 ARE TO BE COMPLETED FOR HIGH SCHOOL STUDENTS ONLY

**Item 14. Advanced Placement.** Enter the number of students by race/ethnicity, sex, LEP, and disability status (students receiving services under the *Individuals with Disabilities Education Act*) who are currently enrolled in Advanced Placement Program mathematics or science courses. Mathematics includes calculus AB and BC. Science includes biology, chemistry, and physics. If this school does *not* participate in a particular Advanced Placement Program course, **darken** the bubble in the *Not Offered* column for that course. If the school does not offer any Advanced Placement Programs for high school students please **darken** the *Not Offered* bubble for Table 14. Type of AP class means the particular AP course, i.e., mathematics, English, computer science, etc, --and *not* the number of AP classes offered.

**Item 15. High School Completers.** Enter the number of students who received a regular high school diploma or a certificate of attendance or completion from the previous (1999-2000) school year. Certificate of attendance or completion refers to an award of less than a regular diploma, or a modified diploma, or fulfillment of an Individual Education Plan for students with disabilities. Please complete by race/ethnicity, sex, LEP, and disability status (students receiving services under the *Individuals with Disabilities Education Act*).

**Item 16. Interscholastic Athletics.** For the entire previous school year (1999-2000), enter the number of sports, teams, and students as of the day of the *first* official interscholastic competition (e.g., game, match, meet). Do *not* include intramural sports or cheerleading. Count each competitive level of a given sport as a separate item (e.g., freshman, junior varsity, and varsity). For example, basketball is *one* sport, but there may be more than one basketball team (e.g., varsity boys, varsity girls, junior varsity boys, etc.). Count a student once for each team he or she is on. For example, a student should be counted *twice* if he or she is on *two* teams.

ITEM 17 IS TO BE COMPLETED BY ALL SCHOOLS

**Item 17. Teachers.** For item 17(a), enter the total number of full-time teachers employed by your school on October 1, 2000. For item 17(b), enter the number of full-time teachers employed by your school who meet all applicable state teacher certification requirements for a standard certificate. Do not include teachers who have emergency, temporary or provisional certification. For beginning teachers, include, as certified, those who have met all of the standard teacher education requirements with the exception of the State-required probationary period.

**You must return all sheets of this form, even if you did not use pages 6, 7, 8, or 9 because it did not pertain to your school.**

OMB No. 1870-0500  
Expiration Date: 12/31/2001

17300

PLEASE CORRECT OR  
SUPPLEMENT THE  
INFORMATION ON THE  
LABEL IF IT IS INCORRECT  
OR INCOMPLETE:

[illegible]

- |   |   |  |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |  |                                   |
|---|---|--|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|--|-----------------------------------|
| 1. <b>Grades Offered:</b> (Darken all that apply.)                            |   | If this school is partially or totally graded, darken the grades offered in the bubbles below: |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | What is the level of this school?        |                                   |
| If this school is totally ungraded, darken this bubble: <input type="radio"/> |   | Pre-K  | K                     | 1                     | 2                     | 3                     | 4                     | 5                     | 6                     | 7                     | 8                     | 9                     | 10                    | 11                    | 12                    | <input type="radio"/> Elementary         | <input type="radio"/> High School |
| <b>YES</b>  |   | <input type="radio"/>  | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> Middle/Junior High | <input type="radio"/> Other       |
| <b>NO</b>   |   | <input type="radio"/>  | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |  |                                   |
| 2. <b>Special Education:</b>  | Does this school offer <b>only</b> special education services? . . . . .  |  |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | <input type="radio"/> Yes                | <input type="radio"/> No          |
| 3. <b>Ability Grouping:</b>   | Do you have any students in this school who are ability grouped for classroom instruction in mathematics or English-Reading-Language Arts? . . .  |  |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | <input type="radio"/> Yes                | <input type="radio"/> No          |
| 4. <b>Magnet School or Program:</b>   | a. Is this school either a magnet school or a school operating a magnet program within the school? . . . . .  |  |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | <input type="radio"/> Yes                | <input type="radio"/> No          |
|   | b. If the answer to 4a was "YES", does the entire school population participate in the magnet school program? . . . . .   |  |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | <input type="radio"/> Yes                | <input type="radio"/> No          |
| 5. <b>Charter School:</b>   | Is this school a charter school? . . . . .  |  |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | <input type="radio"/> Yes                | <input type="radio"/> No          |
| 6. <b>Alternative School:</b>   | Is this school an alternative school? <input type="radio"/> Yes <input type="radio"/> No If so, is it designed to meet the needs of: <input type="radio"/> students with academic difficulties? <input type="radio"/> students with discipline problems? <input type="radio"/> pregnant students? |  |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |  |                                   |
| 7. <b>Pupil Statistics:</b>   | (Do not include pre-kindergarten/pre-school children.) The column <i>Students with Disabilities: IDEA</i> refers to children and youth receiving services under the <i>Individuals with Disabilities Education Act</i> .  |  |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |  |                                   |

**TABLE 7 Pupil Statistics**

NUMBER OF STUDENTS	SEX*	RACE/ETHNICITY					(6) TOTAL	(7) Students with Disabilities: IDEA	(8) LEP**
		(1) American Indian or Alaskan Native	(2) Asian or Pacific Islander	(3) Hispanic	(4) Black, Not of Hispanic Origin	(5) White, Not of Hispanic Origin			
A. Enrollment	M	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	
	F	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	
B. In Gifted/ Talented Programs	M	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>
	F	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>
C. Needing LEP Programs	M	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	
	F	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	
D. Enrolled in LEP Programs (Of those reported in 7.C.)	M	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	
	F	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	

\* SEX:  
M = MALE;  
F = FEMALE  
\*\*LEP = limited English proficient

The sum of the totals reported in Tables 10.1, 10.2, 10.3 and 11 equals the number of Students With Disabilities receiving special education services under IDEA reported in Column 7 on Table 7, Row A. Although you are not required to report data by sex on Table 11, you are required to maintain data on the sex of all students with disabilities for the purposes of responding to Table 7 Row A. Please note that districts are only required to provide data on the sex of specific subcategories of students with disabilities in Tables 10.1, 10.2, and 10.3.

District Name: \_\_\_\_\_

School Name: \_\_\_\_\_

Individual School Report: ED102 — Page 2 of 10

17300



**Table 8: Discipline (Students Without Disabilities).** Please report the following data for the 1999 - 2000 School Year. Do not include pre-kindergarten/pre-school children. Please read the specific instructions for this table carefully before completing this item.

NUMBER OF STUDENTS		RACE/ETHNICITY					(6) TOTAL	(7) LEP**
		(1) American Indian or Alaskan Native	(2) Asian or Pacific Islander	(3) Hispanic	(4) Black, Not of Hispanic Origin	(5) White, Not of Hispanic Origin		
A. Corporal Punishment	M							
	F							
B. Out of School Suspensions	M							
	F							
C. Total Expulsions	M							
	F							
D. Expulsions -- Total Cessation of Educational Services	M							
	F							
E. Expulsions -- Zero Tolerance Policies	M							
	F							

\* SEX:  
M = MALE;  
F = FEMALE  
\*\*LEP = limited English proficient

**Table 9: Discipline of Students with Disabilities.** Please report, for the 1999 - 2000 School Year, data on corporal punishment, and long-term suspensions/expulsions (both with and without services) for students with disabilities served under the *Individuals with Disabilities Education Act* (in the column entitled *Served under IDEA*) and *Section 504 of the Rehabilitation Act of 1973* (in the column entitled *Served under Section 504 Only*). See the specific instructions for the definition of long-term suspension/expulsion and the specific instructions for Item 8 for the definition of corporal punishment. For each row, count each student only once. Do not include pre-kindergarten/pre-school children. See general instructions for the appropriate response if a cell has no students or is not applicable to this school. Individual students may be reported in more than one row.

NUMBER OF STUDENTS		(1) Served under IDEA	(2) Served under Section 504 Only
A. Corporal Punishment			
B. Long-term suspension/expulsion: non-cessation of services			
C. Long-term suspension/expulsion: cessation of services			

District Name: \_\_\_\_\_

School Name: \_\_\_\_\_

Individual School Report: ED102 — Page 3 of 10

17300



**Item 10: Children with Disabilities.** Please complete the following tables by race, sex, LEP and educational placement for the number of children with disabilities receiving services who, under the *Individuals with Disabilities Education Act*, are receiving services in this school. Educational placement is defined as the percentage of the day that a student receives special education services outside the regular class. Include all students attending this school regardless of whether they are resident or non-resident of the reporting school district. Do *not* count *pre-kindergarten/pre-school* children. See general instructions for the appropriate response if a cell has no students or is not applicable to this school (e.g., this school does not use the subcategories of mild, moderate, and severe).

TABLE 10.1

DISABILITY CATEGORY (See Specific Instructions, for Item 10, before completing this item.)	SEX*	RACE/ETHNICITY					Optional** (6) TOTAL	EDUCATIONAL PLACEMENT: TIME OUTSIDE REGULAR CLASSROOM			(10) LEP****
		(1) American Indian or Alaskan Native	(2) Asian or Pacific Islander	(3) Hispanic	(4) Black, Not of Hispanic Origin	(5) White, Not of Hispanic Origin		(7) Less than 21%***	(8) Between 21% and 60%***	(9) More than 60%***	
A. Mild Retardation	M										
	F										
B. Moderate Retardation	M										
	F										
C. Severe Retardation	M										
	F										
D. TOTAL	M										
	F										

PLEASE FILL IN ALL INFORMATION INCLUDING LEP ITEMS. IF THE ANSWER IS ZERO, PLEASE ENTER ZERO. (For example, if you entered "school total" LEP data other than zero in Table 7 (Table 7, Row C, Column 6), but your school has no LEP students in the more specific "sub-total" categories on this page, please enter zero. If you have LEP students in these subcategories, please enter the number of these students.)

\* SEX: M = MALE; F = FEMALE

\*\* Dark lines denote that this part of the table is optional. (See page 5 of instruction sheet.)

\*\*\* See Definitions on page 3 of ED102 instruction sheet for definitions, including complete label for **Less than 21%, Between 21% and 60%, and More than 60%**

\*\*\*\* LEP = limited English proficient

District Name: \_\_\_\_\_

School Name: \_\_\_\_\_



TABLE 10.2

DISABILITY CATEGORY	SEX*	RACE/ETHNICITY					Optional** (6) TOTAL	EDUCATIONAL PLACEMENT: TIME OUTSIDE REGULAR CLASSROOM			(10) LEP****
		(1) American Indian or Alaskan Native	(2) Asian or Pacific Islander	(3) Hispanic	(4) Black, Not of Hispanic Origin	(5) White, Not of Hispanic Origin		(7) Less than 21%***	(8) Between 21% and 60%***	(9) More than 60%***	
A. Emotional Disturbance	M										
	F										
B. Specific Learning Disability	M										
	F										
Total of Table 10.2. See page 6 of instruction sheet											

PLEASE FILL IN ALL INFORMATION INCLUDING LEP ITEMS. IF THE ANSWER IS ZERO, PLEASE ENTER ZERO. (For example, if you entered "school total" LEP data other than zero in Table 7 (Table 7, Row C, Column 6), but your school has no LEP students in the more specific "sub-total" categories on this page, please enter zero. If you have LEP students in these subcategories, please enter the number of these students.)

TABLE 10.3 IS TO BE COMPLETED ONLY BY SCHOOLS IN STATES WHICH HAVE ADOPTED THE CATEGORY OF DEVELOPMENTAL DELAY FOR STUDENTS WITH DISABILITIES IN KINDERGARTEN THROUGH AGE 9.

**Table 10.3 Developmental Delay.** Schools are *only* permitted to submit data using the following table for children with disabilities in kindergarten through age 9: if 1) their state has adopted this category in accordance with the provisions of Section 602(3)(b) of the *Individuals with Disabilities Education Act* (IDEA); 2) the school district completing the ED 101 form has adopted this category; and 3) the state is actually using this category to report data from this school district for IDEA child count purposes. *Do not provide data using this table unless all three of these IDEA requirements are met.*

TABLE 10.3

DISABILITY CATEGORY	SEX*	RACE/ETHNICITY					Optional** (6) TOTAL	EDUCATIONAL PLACEMENT: TIME OUTSIDE REGULAR CLASSROOM			(10) LEP****
		(1) American Indian or Alaskan Native	(2) Asian or Pacific Islander	(3) Hispanic	(4) Black, Not of Hispanic Origin	(5) White, Not of Hispanic Origin		(7) Less than 21%***	(8) Between 21% and 60%***	(9) More than 60%***	
Developmental Delay	M										
	F										

\* SEX: M = MALE; F = FEMALE

\*\* Dark lines denote that this part of the table is optional. (See page 6 of instruction sheet.)

\*\*\* See Definitions on page 3 of ED102 instruction sheet for definitions, including complete label for **Less than 21%, Between 21% and 60%, and More than 60%**

\*\*\*\* LEP = limited English proficient



District Name: \_\_\_\_\_

School Name: \_\_\_\_\_



TO BE COMPLETED BY ELEMENTARY AND MIDDLE SCHOOLS (GRADES K-8) ONLY

**Item 12A. Testing (Grade to Grade Promotion).** Please complete the following table *if your school administered, in the 1999-2000 school year, a district- or state-required test that students are either required to pass or that is used as a significant factor in making promotion decisions for all students taking the test.* If your school conducted tests for grade-to-grade promotion for more than one grade, please photocopy the page (prior to completing) as many times as are necessary in order to report on each test, and report data using both the table on this page and as many photocopied tables as are appropriate. If students were **not** required to pass a district- or state-required test to be promoted from one grade to the next, please darken the bubble entitled "*No such tests were administered*". If students were required to pass such a test, please darken the appropriate bubble indicating whether this test was the "sole criterion" or a "significant" criterion and complete the table. If all students were required to take a district- or state-required test, and must pass the test to be promoted from one grade to the next, please **darken** the bubble entitled "*Sole criterion*". However, if all students were required to take the test, and the test is an important criterion in the decision on whether or not to promote the student from grade to grade, but other criteria, such as teacher recommendations or the student's grades were used in the promotion decision, please **darken** the bubble entitled "*Significant criterion*". Please provide the following data for the most recent testing of students in these grades during the 1999-2000 school year by race/ethnicity, limited English proficiency (in the column marked *LEP*), and whether the student is receiving services under the *Individuals with Disabilities Education Act* (in the column entitled *Students with Disabilities/IDEA*), or under *Section 504 of the Rehabilitation Act of 1973* (in the column entitled *Section 504 Only*) and sex. *Do not count students who were not tested because they had passed the test on a previous occasion.* Include in Rows A or B those students who took the test and were provided with accommodations, modifications, or adaptations, such as a different setting, extended time, Braille, or use of dictionaries by LEP students. All students who did not take the test should be reported in Row C. Students who were tested using alternate assessments should be reported in Row D. An alternate assessment is an assessment provided to children with disabilities who cannot participate in a state- or district-wide assessment program, even with appropriate accommodations. If students are required to pass more than one test in order to be promoted from one grade to the next, include that student in the Row entitled *Tested and Passed* if that student passed all tests that he or she was required to pass; if that student failed one or more tests, report that student in the Row entitled *Tested and Failed*.

Please darken the appropriate bubble for information reported in this table:

☐ No such tests were administered    ☐ Sole criterion    ☐ Significant criterion

Tests were required for promotion to:

☐ Grade 1    ☐ Grade 3    ☐ Grade 5    ☐ Grade 7  
☐ Grade 2    ☐ Grade 4    ☐ Grade 6    ☐ Grade 8    ☐ Grade 9

TABLE 12A

NUMBER OF STUDENTS	SEX*	RACE/ETHNICITY					(6) TOTAL	(7) Students with Disabilities/ IDEA	(8) Section 504 Only	(9) LEP**
		(1) American Indian or Alaskan Native	(2) Asian or Pacific Islander	(3) Hispanic	(4) Black, Not of Hispanic Origin	(5) White, Not of Hispanic Origin				
A. Tested and passed	M									
	F									
B. Tested and failed	M									
	F									
C. Not tested	M									
	F									
D. Alternate Assessments	M									
	F									

\* SEX:

M = MALE;

F = FEMALE

\*\*LEP = limited English proficient

IMPORTANT! RETURN THIS PAGE  
EVEN IF IT WAS NOT FILLED OUT

District Name: \_\_\_\_\_

School Name: \_\_\_\_\_

TO BE COMPLETED BY HIGH SCHOOLS (GRADES 9-12) ONLY

**Item 12B. Testing (High School Graduation).** Please complete the following table *if your school administered, in the 1999-2000 school year, a district- or state-required test that students are either required to pass or that is used as a significant factor in making graduation decisions for all students taking the test.* If students were not required to pass a district- or state-required test to graduate from high school, please **darken** the bubble entitled "No such tests were administered". If students were required to pass such a test, please darken the appropriate bubble indicating whether the test was the "sole criterion" or a "significant" criterion and complete the table. If all students were required to take a district- or state-required test, and must pass the test to graduate from high school, please **darken** the bubble entitled "Sole criterion". However, if all students were required to take the test, and the test is an important criterion in the decision on whether or not the student graduates from high school, but other criteria, such as teacher recommendations or the student's grades were used in the graduation decision, please **darken** the bubble entitled "Significant criterion". Please provide the following data for the testing of students in these grades during the 1999-2000 school year by race/ethnicity, limited English proficiency (in the column marked LEP), and whether the student is receiving services under the *Individuals with Disabilities Education Act* (in the column entitled *Students with Disabilities/IDEA*), or under *Section 504 of the Rehabilitation Act of 1973* (in the column entitled *Section 504 Only*) and sex. *Do not count students who were not tested because they had passed the test on a previous occasion.* Include in Rows A or B those students who took the test and were provided with accommodations, modifications, or adaptations, such as a different setting, extended time, Braille, or use of dictionaries by LEP students. All students who did not take the test and have not passed the test in prior years should be reported in Row C. Students who were tested using alternate assessments should be reported in Row D. An alternate assessment is an assessment provided to children with disabilities who cannot participate in a state- or district-wide assessment program, even with appropriate accommodations. If students are required to pass more than one test in order to graduate, include that student in the Row entitled *Tested and Passed* if that student passed all tests that he or she was required to pass; if that student failed one or more tests, report that student in the Row entitled *Tested and Failed*.

Please darken the appropriate bubble for information reported in this table:

☐ No such tests were administered    ☐ Sole criterion    ☐ Significant criterion

TABLE 12B

NUMBER OF STUDENTS	SEX*	RACE/ETHNICITY					(6) TOTAL	(7) Students with Disabilities/IDEA	(8) Section 504 Only	(9) LEP**
		(1) American Indian or Alaskan Native	(2) Asian or Pacific Islander	(3) Hispanic	(4) Black, Not of Hispanic Origin	(5) White, Not of Hispanic Origin				
A. Tested and passed	M									
	F									
B. Tested and failed	M									
	F									
C. Not tested	M									
	F									
D. Alternate Assessments	M									
	F									

\* SEX:

M = MALE;  
F = FEMALE

\*\*LEP = limited English proficient



District Name: \_\_\_\_\_

School Name: \_\_\_\_\_



**ITEM 13 IS TO BE COMPLETED FOR THE LOWEST AND HIGHEST ELEMENTARY GRADES (BETWEEN GRADES 1 AND 6) ONLY**

**Item 13. Student Assignment.** If the total percentage of minority (American Indian or Alaskan Native, Asian or Pacific Islander, Hispanic, and Black (Not of Hispanic origin)) students in this school is more than 20% but less than 80%, please complete the following table for all **elementary entry and exit classrooms** (that is, for the **lowest** grade offered and the **highest** grade offered between grades 1 and 6) in this school. See instructions on **entry** and **exit**. Do not count *pre-kindergarten/pre-school and kindergarten*. If you have any students in these classes who are ability grouped for instruction in mathematics, or English-Reading-Language Arts, please **darken YES**; otherwise **darken NO**. The Teacher ID is the unique identifier or first seven (7) characters of the teacher's last name. **For more than 13 classrooms, photocopy this chart and continue.** Make a copy for your records. If your entry or exit grade is part of a combined class (for example, kindergarten and 1st grade or 5th and 6th grade), please include the class in the table, report as the *grade* the entry or exit grade that is included in the class, and report on the total number of students in the class.

**TABLE 13**

(1) TEACHER ID	(2) GRADE	ABILITY GROUPING		RACE/ETHNICITY OF STUDENTS					(10) LEP*
		(3) YES	(4) NO	(5) American Indian or Alaskan Native	(6) Asian or Pacific Islander	(7) Hispanic	(8) Black, Not of Hispanic Origin	(9) White, Not of Hispanic Origin	
A		<input type="radio"/>	<input type="radio"/>						
B		<input type="radio"/>	<input type="radio"/>						
C		<input type="radio"/>	<input type="radio"/>						
D		<input type="radio"/>	<input type="radio"/>						
E		<input type="radio"/>	<input type="radio"/>						
F		<input type="radio"/>	<input type="radio"/>						
G		<input type="radio"/>	<input type="radio"/>						
H		<input type="radio"/>	<input type="radio"/>						
I		<input type="radio"/>	<input type="radio"/>						
J		<input type="radio"/>	<input type="radio"/>						
K		<input type="radio"/>	<input type="radio"/>						
L		<input type="radio"/>	<input type="radio"/>						
M		<input type="radio"/>	<input type="radio"/>						

\*LEP = limited English proficient

PLEASE FILL IN ALL INFORMATION INCLUDING LEP ITEMS. IF THE ANSWER IS ZERO, PLEASE ENTER ZERO. (For example, if you entered "school total" LEP data other than zero in Table 7 (Table 7, Row C, Column 6), but your school has no LEP students in the more specific "sub-total" categories on this page, please enter zero. If you have LEP students in these subcategories, please enter the number of these students.)

If there are more than thirteen (13) classrooms, darken here, and attach completed chart(s). ☐

**IMPORTANT! RETURN THIS PAGE EVEN IF IT WAS NOT FILLED OUT**

District Name: \_\_\_\_\_

School Name: \_\_\_\_\_



ITEMS 14 AND 15 ARE TO BE COMPLETED BY HIGH SCHOOLS ONLY

**Item 14. Advanced Placement:** Please complete the following table if this school offers any of the listed Advanced Placement Program Courses for Senior High School Students. If this school does not participate in a particular advanced placement program course, darken the *Not Offered* bubble for that course. If this school does not offer any Advanced Placement Programs for high school students, **darken** this bubble ☐.

a. If your school offers advanced placement, how many different types of advanced placement classes does your school offer?

--	--	--

TABLE 14

PLEASE FILL IN ALL INFORMATION INCLUDING LEP ITEMS. IF THE ANSWER IS ZERO, PLEASE ENTER ZERO. (For example, if you entered "school total" LEP data other than zero in Table 7 (Table 7, Row C, Column 6), but your school has no LEP students in the more specific "sub-total" categories on this page, please enter zero. If you have LEP students in these subcategories, please enter the number of these students.)

NUMBER OF STUDENTS	NOT OFFERED	SEX*	RACE/ETHNICITY					(6) Students with Disabilities: IDEA	(7) LEP**
			(1) American Indian or Alaskan Native	(2) Asian or Pacific Islander	(3) Hispanic	(4) Black, Not of Hispanic Origin	(5) White, Not of Hispanic Origin		
A. Mathematics	<input type="radio"/>	M	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
		F	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
B. Science	<input type="radio"/>	M	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
		F	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

\*Sex:  
M=Male; F=Female  
\*\*LEP = limited English proficient

Please use 1999 - 2000 data for questions 15 and 16 below.

**Item 15. High School Completers:** Please complete the following table, if this school grants high school diplomas and/or certificates of attendance or completion. (Please use School Year 1999-2000 data.) Please see general instructions for the appropriate response if a cell has no students or is not applicable.

TABLE 15

PLEASE FILL IN ALL INFORMATION INCLUDING LEP ITEMS. IF THE ANSWER IS ZERO, PLEASE ENTER ZERO.

TYPE OF COMPLETION CERTIFICATE	SEX*	RACE/ETHNICITY					(6) Students with Disabilities: IDEA	(7) LEP**
		(1) American Indian or Alaskan Native	(2) Asian or Pacific Islander	(3) Hispanic	(4) Black, Not of Hispanic Origin	(5) White, Not of Hispanic Origin		
A. Diploma	M	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	F	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
B. Certificate of Attendance or Completion	M	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	F	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

\*Sex: M=Male; F=Female \*\*LEP = Limited English Proficient


**IMPORTANT! RETURN THIS PAGE EVEN IF IT WAS NOT FILLED OUT**

District Name: \_\_\_\_\_

School Name: \_\_\_\_\_



**ITEM 16 IS TO BE COMPLETED BY HIGH SCHOOLS ONLY**

**Item 16. Interscholastic Athletics:** Please complete the following table using data from the entire previous School Year 1999-2000. See specific instructions for completing this table. If this school does not have interscholastic athletics, **darken** here .

- A. Enter the number of sports with only male, only female, or both.
- B. Enter the number of teams with only male, only female, or both.
- C. Enter the number of participants by male and female.

**TABLE 16**

	(1) With only Male Students	(2) With only Female Students	(3) With both Male and Female Students									
A. Number of Different Sports	<table border="1"><tr><td></td><td></td><td></td></tr></table>				<table border="1"><tr><td></td><td></td><td></td></tr></table>				<table border="1"><tr><td></td><td></td><td></td></tr></table>			
B. Number of Teams	<table border="1"><tr><td></td><td></td><td></td></tr></table>				<table border="1"><tr><td></td><td></td><td></td></tr></table>				<table border="1"><tr><td></td><td></td><td></td></tr></table>			
C. Number of Participants in Teams by Gender:												
	(1) With only Male Students	(2) With only Female Students	(3) With both Male and Female Students									
(a) Male	<table border="1"><tr><td></td><td></td><td></td></tr></table>				<table border="1"><tr><td></td><td></td><td></td></tr></table>				<table border="1"><tr><td></td><td></td><td></td></tr></table>			
(b) Female	<table border="1"><tr><td></td><td></td><td></td></tr></table>				<table border="1"><tr><td></td><td></td><td></td></tr></table>				<table border="1"><tr><td></td><td></td><td></td></tr></table>			

**ITEM 17 MUST BE COMPLETED BY ALL SCHOOLS**

**Item 17. Teachers.**

a. How many full-time teachers were employed by your school on October 1, 2000?

--	--	--

b. How many full-time teachers employed by your school on October 1, 2000 meet all applicable state teacher certification requirements for a standard certificate? Do not include teachers who have emergency, temporary, or provisional certification. For beginning teachers, include as certified, those who have met all the standard teacher education requirements with the exception of the State-required probationary period.

--	--	--